

EXHIBIT B

IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF OHIO
EASTERN DIVISION

IN RE: NATIONAL PRESCRIPTION)
OPIATE LITIGATION)
) MDL No. 2804
THIS DOCUMENT RELATES TO:) Case No. 17-md-2804
)
Track Three Cases)

VIDEOTAPED DEPOSITION OF APRIL J. CARAWAY
Conducted via Zoom
Warren, Ohio
Friday, December 4th, 2020

REPORTED BY: GREG S. WEILAND, CSR, RMR, CRR
JOB NO.: 4342602

1 A. Yes.

2 Q. And what are generally your duties as the
3 executive director?

4 A. There are 50 Mental Health and Recovery
5 Boards in Ohio for the 88 counties. Ours is just
6 Trumbull County. Some of the boards cross counties.

7 So for Trumbull County, we're responsible
8 for providing a system of care to treat mental
9 health and addiction issues and to reduce those
10 issues through prevention efforts, and we oversee
11 the agencies that we have a contract with by
12 providing and funding for specific programming,
13 looking at outcomes, working together with them to,
14 you know, use evidence-based programs to make sure
15 that the dollars are being used the best that they
16 can.

17 I have an 18-member board of directors
18 that I report to, and we have several funding
19 sources through a local levy. We get federal grant
20 money and state money through the Ohio Department of
21 Mental Health and Addiction Services.

22 So in the Ohio Revised Code, boards can't
23 do, like, direct service. Like, I can't meet with
24 the client and provide addiction treatment face to
25 face. We have to contract with the provider agency

1 certified by the Ohio Department and Mental Health
2 and Addiction Services to provide those services.

3 So we have a small staff at the board so
4 that, you know, as much money as possible goes out
5 into the community to treat, get people the
6 treatment they need.

7 Q. How many people do you have on staff
8 presently?

9 A. Nine, including myself.

10 Q. And has that been generally the case,
11 approximately nine including the executive director,
12 since 2004 when you've been employed with the Mental
13 Health and Recovery Board, or has that changed over
14 the years?

15 A. It's gone down over the years.

16 Q. What was the most it ever was over the
17 years since you've been there?

18 A. Maybe 13.

19 Q. Do you know when it was approximately 13?

20 A. Well, let me think. When I was hired
21 in -- let me think -- 11.

22 Q. 2011, or you're saying --

23 A. No, there were 11 when I was hired in
24 2004.

25 Q. And you think that was the most that there

1 Q. And the second one says "Member of the
2 Trumbull County Opiate Death Review Committee."

3 Could you explain what that is?

4 A. Yeah, it's a committee comprised of health
5 department folks, the coroner's office, law
6 enforcement, children's services, a couple of the
7 treatment providers and my department, where we
8 review the overdoses and talk about how it's, you
9 know, impacting our community and strategize ways to
10 continue to work together to try and, you know,
11 bring those numbers down.

12 We review -- the health department nurse
13 goes over the autopsies and tells us, like, you
14 know, the person's age and where they were found
15 and, you know, stuff like that.

16 Q. What was your role in that committee? Did
17 you have a position, or were you just a member and
18 you --

19 A. Yeah, you know, I think I do have a title.
20 I don't know if I'm vice chair or secretary. I've
21 got some -- I mean, we all just sort of work
22 together.

23 But, yeah, I'm, like, I do have a title
24 under Frank. Maybe I'm the vice or second chair.
25 I'm just -- I'm not sure what they called it.

1 role in that committee is. And I was
2 explaining that I'm the liaison to the agencies
3 and the recovery houses and so forth who
4 provide services to clients. So we make sure
5 that they have Narcan and then they do bed
6 checks and they know that, you know, there's a
7 spike.

8 We also get an alert from the state at
9 times. The health department nurses work with
10 our local hospitals to review, it's called an
11 epidemiology report. I had to learn a lot of
12 things I didn't know before. I guess they do
13 this if there's a lot of flu cases, so they do
14 it if there's a lot of overdoses.

15 And then the nurses get the information,
16 and they, you know, put in the information to
17 the State of Ohio Department of Health. Ohio
18 Department of Health will generate what they
19 call an epi alert to me, to them, that says
20 that there has been a spike in overdoses. And
21 at times, our state department will reach out
22 and say, what have you done to, you know,
23 help -- to do something because we're seeing a
24 spike in overdoses in your county. So I share
25 information back with them also.

1 Death Review Committee that's separate and apart
2 from your role as an executive director of the
3 Mental Health and Recovery Board, or is it when
4 you're doing the things that you just described, do
5 you see that also as your role as the executive
6 director?

7 A. Both.

8 Q. Does the committee, the Opiate Death
9 Review Committee, does it take any specific action
10 or initiatives, or is it a group of individuals who
11 have other roles in the community like you do as an
12 executive director of the Mental Health and Recovery
13 Board and the action is taken through the Mental
14 Health and Recovery Board?

15 A. We take action --

16 MR. BADALA: Hold on. Before you answer,
17 objection to form.

18 THE WITNESS: We take action together as a
19 committee. Like, we've done joint press
20 releases on joint letterheads to get the
21 information out that there has been a spike in
22 overdoses, things like that. We've done
23 campaigns together, marketing, billboard
24 campaigns to, you know, to get people to call
25 211, which is our call line to get into

1 treatment, things like that.

2 So we take action also. We don't just
3 review the data.

4 BY MR. MANNIX:

5 Q. Okay. And the action you described was
6 one -- something like press releases and what other
7 formal actions taken?

8 A. Like community education campaigns or
9 marketing campaigns, things like that.

10 Q. Okay. And then the last one listed here
11 is "Former Member of Governor John Kasich's State
12 Opioid Task Force."

13 What did that entail?

14 A. Drives to Columbus. As part of the task
15 force, a couple board directors were asked to join,
16 and it was just state-level sort of committee work
17 where we were providing information, and they were
18 helping us in our community if there were things
19 that, you know, we needed on a local level.

20 Q. Okay. Other than those three, do any of
21 these other items and initiatives focus on opioids?

22 MR. BADALA: Objection to form.

23 THE WITNESS: My work with the Ohio
24 Association of County Behavioral Health
25 Authorities, that's our board association, so

1 So in my professional experience, when
2 opiate pain meds are prescribed, it is a
3 gateway to long-term addiction and death just,
4 again, what I've seen 80 percent of the time.
5 I can't speak for the general population
6 because I'm entrenched in the work that I do.

7 BY MR. MANNIX:

8 Q. Okay. And I understand that.

9 And what I'm trying to understand, when
10 you're acting in your role, and I do want to know
11 what you're thinking under these circumstances, is
12 it your mindset that there are -- you assume that in
13 many cases prescription opioids are properly
14 prescribed, but you also believe that in other
15 situations they're not properly prescribed; is that
16 fair?

17 MR. BADALA: Objection to form, again.
18 Asked and answered. You're asking the same
19 question now the seventh time. And also lack
20 of foundation.

21 MR. MANNIX: This is not the same
22 question. And we can read the seven questions
23 I read. They're not the same question.

24 I posed the question. I ask for an
25 answer.